

**VERMONT DEPARTMENT FOR CHILDREN AND FAMILIES
FAMILY SERVICES DIVISION
SDM® RISK ASSESSMENT**

r: 06/09

Family Name: _____ **MIS #:** _____ **District:** _____

Type: ☐ Investigation ☐ Assessment **Date:** ____/____/____ **Worker:** _____

Who participated in this assessment?

- ☐ Primary caregiver
☐ Secondary caregiver
☐ Children (names): _____
☐ Others (names and roles): _____

NEGLECT/RISK OF HARM

Score

- N1. Current report is for neglect or risk of harm
a. No 0
b. Yes 1 _____
- N2. Prior investigations/Ch. 49 assessments involving any adult currently living in the household (*assign highest score that applies*)
a. None 0
b. One or more, abuse only 1
c. One or two for neglect/risk of harm 2
d. Three or more for neglect/risk of harm 3 _____
- N3. Prior ongoing case and/or custody (*do not include CHINS [C], truancy, or delinquency*)
a. No 0
b. Yes 1 _____
- N4. Number of children involved in the current concern
a. Current report is not for CA/N 0
b. One, two, or three 0
c. Four or more 1 _____
- N5. Age of youngest child in the home
a. Two or older 0
b. Under two 1 _____
- N6. Primary caregiver provides physical care that:
a. Meets child's needs 0
b. Does not meet child's needs 1 _____
- N7. Primary caregiver has a past or current mental health problem interfering with family functioning
a. No 0
b. Yes 1 _____
☐ Within 12 months
☐ More than 12 months ago
- N8. Primary caregiver has a past or current alcohol or drug problem interfering with individual or family functioning (*mark applicable items and add for score*)
a. Not applicable 0
b. ☐ Alcohol 1
☐ Within 12 months
☐ More than 12 months ago
c. ☐ Drug 1
☐ Within 12 months
☐ More than 12 months ago
- N9. Characteristics of children in household (*mark applicable items and add for score*)
a. None of the child characteristics are present 0
b. ☐ Medically fragile/failure to thrive 1
c. ☐ Developmental or physical disability 1
d. ☐ Positive toxicology screen at birth 1 _____
- N10. Housing (*mark applicable items and add for score*)
a. Safe and stable residence or long-term shelter 0
b. ☐ Current housing is physically unsafe 1
c. ☐ No shelter or about to be evicted 2 _____

TOTAL NEGLECT RISK SCORE _____

PHYSICAL OR SEXUAL ABUSE, EMOTIONAL MALTREATMENT

Score

- A1. Current report is for physical or sexual abuse or emotional maltreatment by caregiver or adult household member
a. No 0
b. Yes 1 _____
- A2. Prior abuse investigations/Ch. 49 assessments involving any adult currently living in the household (*assign highest score that applies*)
a. None 0
b. One 1
c. Two or more 2 _____
- A3. Prior ongoing case and/or custody (*do not include CHINS [C], truancy, or delinquency*)
a. No 0
b. Yes 1 _____
- A4. Prior injury to a child resulting from CA/N
a. No 0
b. Yes 1 _____
- A5. Primary caregiver's view of this abuse incident (*mark applicable items and add for score*)
a. Neither b or c applies 0
b. ☐ Blames child 1
c. ☐ Justifies maltreatment of child 2 _____
- A6. Household violence, threats, or intimidation among adults in the past year
a. None or one 0
b. Two or more incidents of household violence within the past year 2
☐ Intimate partner ☐ Other adult
- A7. Primary caregiver characteristics (*mark applicable items and add for score*)
a. Not applicable 0
b. ☐ Provides insufficient emotional/psychological support 1
c. ☐ Employs excessive/inappropriate discipline 1
d. ☐ Over-controlling parent 1 _____
- A8. Primary caregiver has a history of abuse or neglect as a child
a. No 0
b. Yes 1 _____
- A9. Secondary caregiver/adult has a past or current alcohol or drug problem interfering with individual or family functioning
a. No 0
b. Yes, alcohol and/or drug (*mark all applicable*) 1
☐ Alcohol ☐ Drug
☐ Within 12 months ☐ More than 12 months ago
- A10. Characteristics of children in household (*mark applicable items and add for score*)
a. None of the child characteristics are present ... 0
b. ☐ Delinquency/CHINS (C) history 1
c. ☐ Developmental or learning disability 1
d. ☐ Mental health/behavioral problem 1 _____

TOTAL ABUSE RISK SCORE _____

SCORED RISK LEVEL. Assign the family's scored risk level based on the highest score on either the neglect or abuse index, using the following chart.

<u>Neglect Score</u>	<u>Abuse Score</u>	<u>Scored Risk Level</u>
<input type="checkbox"/> 0-1	<input type="checkbox"/> 0-1	<input type="checkbox"/> Low
<input type="checkbox"/> 2-4	<input type="checkbox"/> 2-4	<input type="checkbox"/> Moderate
<input type="checkbox"/> 5-8	<input type="checkbox"/> 5-7	<input type="checkbox"/> High
<input type="checkbox"/> 9+	<input type="checkbox"/> 8+	<input type="checkbox"/> Very High

OVERRIDES

Policy Overrides. Mark yes if a condition shown below is applicable in this case. If any condition is applicable, override final risk level to very high.

- ☐ Yes ☐ No 1. Sexual abuse case AND the perpetrator is likely to have access to the child victim.
- ☐ Yes ☐ No 2. Non-accidental injury to a child under age 2.
- ☐ Yes ☐ No 3. Severe non-accidental injury.
- ☐ Yes ☐ No 4. Parent/caregiver action or inaction resulted in death of a child due to abuse or neglect (previous or current).

Discretionary Override. If a discretionary override is made, mark yes, mark the override risk level, and indicate the reason. Risk level may be overridden one level higher or one level lower with approval of supervisor and district director or designee.

- ☐ Yes ☐ No 5. If yes, override risk level (mark one): ☐ Low ☐ Moderate ☐ High ☐ Very High
Discretionary override reason: _____

Supervisor (required for any discretionary override)

Review/Approval of Discretionary Override: _____ Date: ____/____/____

District Director (only required for discretionary override to lower risk level)

Review/Approval of Discretionary Override: _____ Date: ____/____/____

FINAL RISK LEVEL

- ☐ Low
☐ Moderate
☐ High
☐ Very High

PROTECTIVE CAPACITIES

Mark all that apply.

- ☐ PC1. The source of this report was the caregiver requesting help.
- ☐ PC2. Caregiver is aware of safety, risk, and need areas and is committed to working toward solutions.
- ☐ PC3. Caregiver has had at least two continuous years since the birth of his/her first child during which no CA/N reports were received.
- ☐ PC4. Caregiver, upon acquiring knowledge of the injury caused by another household member, took protective action.
- ☐ PC5. One or more willing and competent adults (other than the parents) routinely assist in caregiving.
- ☐ PC6. Family functioning supports strong coping skills and resiliency in times of stress.
- ☐ PC7. Caregiver demonstrates an ability to utilize necessary resources to address the child's specific exceptional needs.
- ☐ PC8. Caregiver has had at least two continuous years since the birth of his/her first child during which safe and stable housing was provided.
- ☐ PC9. Caregiver has carried out effective steps to protect the child from hazards in the home.
- ☐ PC10. Primary caregiver was identified as having mental health concerns, but has been following a treatment plan for at least six months and has at least significant symptom reduction.
- ☐ PC11. Caregiver was identified as having a substance abuse concern but has achieved at least six months' abstinence from substances.
- ☐ PC12. Caregiver demonstrates understanding of the impact of household violence on the child, and demonstrates strategies to protect self and the child from household violence.
- ☐ PC13. Caregiver demonstrates willingness to learn from others about managing and supporting the child.
- ☐ PC14. Caregiver has healthy child-rearing practices typical for his/her culture.

Describe facts that support risk items and protective capacities:

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Did any participant disagree with any item on the assessment?

☐ No ☐ Yes If yes, describe below.

#	Who	Different Point of View